

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official Use Only

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.



1. File Number U -

12185

2. Fiscal Year Covered From:

1/1/04 Through: 12/31/04

3. Name and address of person filing.

Name HENRY ERBACH

P.O. Box, Bldg., Room No., if any

Street 4550 ROOSEVELT RD

City HILLSDALE

State ILLINOIS

ZIP Code + 4

60162

4. Name, file number, and address of labor organization.

Name SHEET METAL WORKERS Local 73

Labor Organization File Number 036283

P.O. Box, Building and Room Number, if any

Street 4550 ROOSEVELT RD

City HILLSDALE

State ILLINOIS

ZIP Code + 4

60162

5. Position in labor organization.

EXECUTIVE BOARD MEMBER

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

7.a. Nature of Interest, Transaction, or Income.

7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On

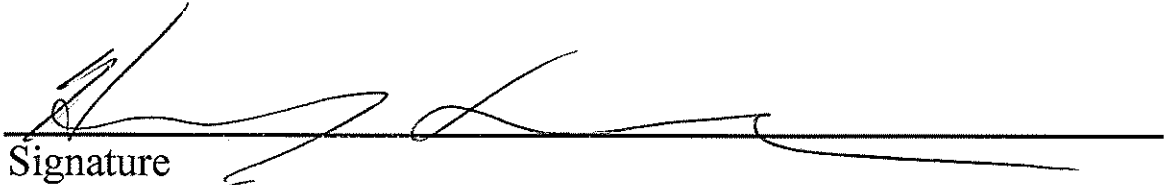
7/20/06 670-279-2571

Date

Telephone Number

## **DISCLAIMER**

The transactions, dealing and interests that are detailed in the attached Form LM-30 represent my good faith effort to reconstruct the reportable occurrences for the period of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year and some or many items may have been unintentionally omitted.



Signature



Date